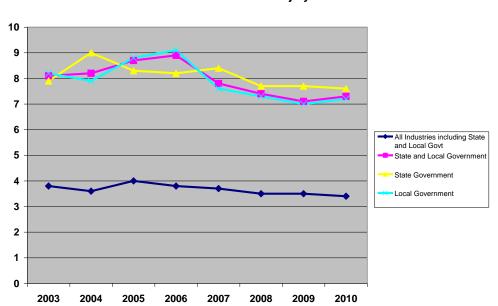
PESH Federal Fiscal Year 2011 SOAR

Summary of Annual Performance Plan Results

The Public Employee Safety and Health (PESH) Bureau continues to make significant progress in protecting New York State's public employees and promoting a safe and healthy workplace. The activities and accomplishments of PESH and the Strategic Plan committees are identified within this report. The following are noteworthy statistical highlights and trends.

• The CY 2010 Total Recordable Injury and Illness Incident Rate for Public Sector Employment in New York State was 7.3 per 100 full-time equivalent workers. Although CY 2010 saw a 2.8% increase from CY2009, a steady decrease had been seen over the previous 3 years (20% decrease from CY2006-2009).



NYS Total Recordable Injury Rate

- The number of public sector fatalities reported in FFY 2011 was 27, a decrease of 10 from FFY 2010.
- PESH conducted 1759 inspections in FFY 2011 in which 3856 Notices of Violations (NOV's) were issued.
- PESH investigated 382 complaints in FY 2011 which is a 10.7% increase from 2010.
- PESH performed 345 consultations in FFY 2011. In addition to initial consultation visits, PESH staff conducted 228 Outreach visits which is an increase of 35.5% from the previous FY.
- PESH investigated 21 allegations of discrimination by employers in FFY 2011.
- In FY 2011 there were 12 contested cases. Two of these were closed and 10 are currently open.

Progress Toward Strategic Plan Accomplishment

Strategic Goal 1

Continue programs to improve workplace safety and health for all public employees. The following performance goals were identified for FY2011.

- Reduce Injury and Illness Rate by 1% in NAICS 237310 (Highway, Street and Bridge Construction).
- Reduce the lost workday rate by 2.5% in the following sectors:
 - o NAICS 623110 Nursing Care Facilities
 - NAICS 623210 Residential Facilities operated by NYS Office for People with Developmental Disabilities (OPWDD)
 - NAICS 623220 Residential Psychiatric Centers
 Operated by the NYS Office of Mental Health (OMH)
- Perform 10 Injury and Illness Records-Only inspections in NYC and other Fire Departments (NAICS 922160) across the state.

Highway, Street and Bridge Construction Strategic Plan Accomplishments FY 2011

Strategic Goal: Improve workplace safety and health for all public employees. **Performance Goal #1A:** Reduce Injury and Illness Rate by 1% in NAICS 237310.

Baseline: 2008

Activity Measures:

- 1. **Partnerships** Continued building partnerships with state agencies, counties, towns and villages and with the various associations with interest regarding highway departments. Partnerships with Civil Service Employees Association (CSEA), Ithaca Town Water Department and Troy City Fire Department resulted in the development of two training videos. Continued partnerships with labor representatives from CSEA, American Federation of State County and Municipal Employees (AFSCME) and United Public Service Employees Union (UPSEU).
- 2. **Injury Data Collection and Analysis** Copies of the Log of Work Related Injuries and Illnesses and the Annual Summary of Work Related injuries and Illnesses were collected from target NAICS. Logs were coded and entered into a database for further analysis.
- 3. **Outreach/Interventions** There were 65 Outreach/Intervention Visits and 71 Technical Assistance visits conducted in FY 2011. The goal set for FY2011 was 70.
- 4. **Consultations** There were 89 consultations conducted in FFY 2011 and a goal of 60.
- 5. **Inspections** There were 323 inspections conducted in FY 2011 with a goal of 140.
- 6. **Training Seminars** There were 31 training sessions conducted in FFY 2011.

Primary Outcome Measures:

The goal of this committee was to reduce the Injury Rate by 1%. The baseline year was 2008. The SH900.1 was used to calculate the rates and was provided directly by the counties*.

Year	Total	% Change From	DART	% Change
	Recordable	Baseline	Rate	
	Injury Rate†			
2008	10.7	Baseline	5.8	Baseline
2009	9.9	7.5% Reduction	6.3	8.6% Increase
2010	10.3	3.7% Reduction	5.7	1.7% Reduction

Introduction:

The goal of this committee was to decrease the injury rate by 1%, using 2008 as the baseline year. The average injury rate in 2010 for NY county highway departments (data is missing from 2 counties) was 10.3. This represents a 3.7% reduction from the 2008 rate of 10.7. This is the final year for the Highway Strategic Plan. FY 2011 has been a year of transition for the group. Members collected 2010 Annual Summary of Work-Related Injuries and Illnesses (SH900.1) data from the various counties to close-out the old plan and establish a baseline for the new Police Protection Strategic Plan (NAICS 922120). The transition has involved identifying and developing new contacts, separate from

^{*} Rates may fluctuate when additional injury data becomes available or is updated.

[†] Number of recordable injuries and illnesses (N) divided by total hours worked (EH) multiplied by 200,000.

some of the safety officers the committee worked with in the past.

This year, as in other years, the group compiled the injury data from each county and identified the employers with the highest injury rate in the state. This committee continued to focus resources on the top 10 employers with the highest injury rates. Training continued to be available to those with the highest injury rates focusing on the most frequent injuries identified on their injury and illness log (SH 900). The committee has provided a limited number of OSHA 10 Hour courses during this year.

This committee, in partnership with CSEA and the Troy City Fire Department, was involved in developing a confined space safety video after the horrible Labor Day confined space fatalities in Tarrytown, NY. Building from the success of this video, members from this committee worked with NYSDOL Communications and the Ithaca Town Water Department to produce the latest video in DOL's Safety and Health Series, "Trenching and Excavation Safety". Now that the video is finished, distribution will begin by making it available on the DOL website and through CSEA.

Several of the members of this committee provided assistance to a number of the municipalities affected by Hurricane Irene and Tropical Storm Lee by staffing State and County EOCs, performing on-site hazard assessments and providing means for mitigating identified hazards, and conducting pre-occupancy air quality screening after restoration work was completed.

Although this sector of the PESH Strategic Plan will no longer formally meet, they will continue to produce and distribute the latest version of the Highway Resource CD.

All of the mandated NEP Recordkeeping Audits have been completed this year with no underreporting trends identified.

The new Strategic Plan for Police Protection will begin by carefully reviewing the baseline injury and illness data to identify trends. The group will then discuss areas needing more research, identify ways to reverse the trends, and select appropriate ways to support the Sheriff Departments in implementing injury prevention programs. They will continue to work closely with counties that have higher injury rates to verify proper recordkeeping procedures, identify site specific trends, and offer appropriate training and other forms of assistance to help them in their reduction efforts.

Partnership Activity:

In Federal Fiscal Year 2011 this group continued to foster union partnerships in their overall injury reduction strategies. The partnership with CSEA was particularly important in identifying strategies to prevent future confined space deaths such as the ones that occurred in September 2010. CSEA represents approximately 80% of the NY county highway department employees, one of which died that September day.

The group continued building partnerships with town highway departments, county Department of Public Works (DPW), and public employer risk managers and safety officers. A partnership with the Association of Counties was particularly valuable in promoting workplace safety initiatives to county governments.

The Highway Strategic Plan committee continued to work with the NYS Department of Transportation (DOT), NYS Office of Parks, Recreation and Historic Preservation (OPRHP), NYS Thruway Authority and NYS Office of General Services (OGS) in providing safety awareness training to employers and employees through customized training sessions and also by providing the OSHA 10 Hr. Construction Safety course.

Since this committee will shift its focus to county level police protection, new partnerships were identified during this past year.

Injury Data Collection, Analysis:

The SH 900.1 Summary of Work Related Occupational Injuries and Illnesses is used to calculate injury rates. Data from this form is entered into the database developed by this committee, where statistics can be captured. A similar database is now being developed for the Police Protection sector.

Year	Total Injury and	% Change	
	Illness Rate		
2008	10.7	Baseline	
2009	9.9	Decrease of 7.5%	
2010	10.3	Decrease of 3.7%	

Outreach:

This strategic plan group was very active in providing outreach to the various highway departments and associations. The Highway Department Resource CD has been updated annually to include new items. There were 71 Technical Assistance visits conducted in FFY 2011.

Training:

The group continued to provide focused training after evaluating the employer's loss work time history. The training programs were based on the documented injuries and illnesses reported within the specific highway department and provided recommendations on how to reduce the reoccurrence of similar type incidents. The Police Protection strategy will be to continue working with the counties having the highest injury rates through outreach and training assistance efforts.

Future Activities Planned:

Although this committee will not continue to focus on highway departments, it will continue to provide services to that sector as needed and the 2012 Highway Department CD will be updated to include new training topics and resources. The Confined Space and Trenching and Excavation DVD's will continue to be promoted.

This committee will begin to focus primarily on county level police protection in FFY 2012. It will collect injury and illness data, identify those counties with the highest injury levels and provide services as needed.

NAICS 623110 (Residential Nursing Care Facilities), NAICS 623210 (OPWDD), NAICS 623220 (OMH) Fiscal Year 2011

Strategic Goal: Improve workplace safety and health for all public employees.

Performance Goal # 1B: Reduce the lost workday rate by 2.5% in NAICS 623110, 623210, 623220.

Baseline Year: 2008 Activity Measures:

- 1. **Partnerships** Continued building partnerships with Public Nursing Homes, PEF, CSEA, Zero Lift Task Force, NYCOSH, WNYCOSH, and Kaleida Health. Continued building partnerships with labor and management representatives at OMH and OPWDD. New partnerships have been built with Staten Island University Hospital and Upstate Medical University Hospital and other healthcare facilities at various stages of developing Safe Patient Handling programs.
- 2. **Injury Data Collection and Analysis** The Log of Work Related Injuries and Illnesses (SH900), the Summary of Work Related Injuries and Illnesses (SH-900.1) and the Annual Report of NYS Government Employees' Workers' Compensation Claims were used for data. IMIS Performance Indicators were used for NAICS 623110. IMIS data for NAICS 623210 and 623220 are inaccurate due to differences in NAICS codes used by staff.
- 3. **Outreach** There were 4 outreach visits and 2 technical assistance conducted.
- 4. **Consultations** There were 4 consultation visits conducted.
- 5. **Inspections** There were 12 inspections conducted in NAICS 623110, 21 in NAICS 623210 and 16 in NAICS 623220.
- **6. Training Seminars** The Strategic Plan Committee cosponsored one Safe Patient Handling Conference on October 4-5th, 2010 in Syracuse and partnered with NYCOSH on two conferences held in Brooklyn and Long Island. PESH staff attended Workplace Violence Prevention training specific to NAICS within this strategic group.

Primary Outcome Measures – Lost Workday Rate (LWDR)

1. Long Term Care¹ (NAICS 623110)

b. LWDR in CY 2010 = 7.5

- a. LWDR in CY 2008 = 7.3
- Baseline Year Increase of 2.7 % from Baseline
- 2. OMH ² (NAICS 623220)
 - a. LWDR in NYS FY 2008/2009 = 4.4 Baseline Year
 - b. LWDR in NYS FY 2009/2010 = 4.9 Increase of 11.4% from Baseline
- 3. OPWDD² (NAICS 623210)
 - a. LWDR in NYS FY 2007/2008 = 5.4 Baseline Year
 - b. LWDR in NYS FY 2008/2009 = 6.3 Increase of 16.7% from Baseline

LWDR = # cases with Lost Work days/ # employees X 100

¹⁻ Based on SH 900.1 Annual Report of Work Related Injuries and Illnesses

²⁻ Based on NYS Workers' Compensation Reports

Introduction:

The PESH Healthcare Strategic Plan began in 1998, focusing on injuries and illnesses in county nursing homes and state veterans' homes. The initial goal was to reduce the Total Recordable Injury Rate by 10% over a five year period. A second phase was added after 2003 with the same goal. Data was collected from the *Summary of Work Related Injuries and Illnesses (SH900.1)* provided by the facilities. Data from 1998-2002 represented only those facilities that provided the SH 900's. Since 2003 the SH900.1 was provided by all facilities and therefore the data includes 100% of the facilities under this strategic plan. Based on this data the overall injury rate has decreased by 36.1% since the beginning of this initiative.

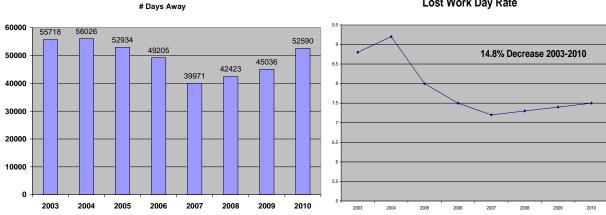
18 1998 1999 2000 2001 2002 2003 2004 2005 2006 2007 2008 2009 2010 Year

Total Recordable Injury Rate

Proper recordkeeping (SH900 and 900.1) by the facilities covered under this strategic plan has been a challenge. In 2003 members of this committee focused heavily on the accuracy and availability of these records by conducting a recordkeeping outreach initiative involving training of record keepers in these facilities. These records have improved since this initiative. From the inception of this strategic plan, 6 nursing homes have either been sold and are no longer public facilities or have closed entirely. This has created a problem when comparing data from one year to another. To address these issues, data presented from 2003 represents all facilities that have remained in service throughout the reporting period.

As indicated previously, phase II began in 2003 with a goal of reducing the Total Recordable Injury Rate (TRIR) by 10%. During this phase, outreach initiatives involving conferences and workshops were provided. Data from the logs were coded and injury trends were identified for each facility. The majority of injuries occurred to Certified Nursing Assistants (CNA's) and were caused by lifting and repositioning residents. Comprehensive consultations at facilities with the highest injury rates were conducted. From 2003-2007 there was a fairly consistent drop in the TRIR, but since 2007, injury rates have fluctuated. Nonetheless, since 2003 the injury rate decreased by 17.2%.





During the last several years of this strategic plan, the number of lost work days and the rate of lost work day injuries have become the focus rather than Total Recordable Injury Incident Rate. The number of lost work days and the lost work day rate are often correlated to severity of injury and directly related to the cost of occupational injures. When using 2003 as a baseline (data represents all county and state long term care facilities), the number of lost work days had decreased to a low in 2007. Between 2003 and 2010 the number of lost work days decreased by 5.6%. From 2008 and 2010 the number of lost work days increased by 24%. The Lost Work Day Rate has decreased 14.8% from 2003-2010 however the rate increased by 2.7% from 2008-2010. This can be due to a number of factors one being the 5% decrease in overall FTE's (Full Time Equivalents) from 2008-2010. Nonetheless, injuries due to resident handling in this NAICS remain high and costly and are very often preventable.

The cost of the lost work days from 2003-2010 equates to \$56,328,129 in wages when using the average salary of a CNA[±]. This is wages only (not including benefits) and does not take into account other direct and indirect costs of work related injuries. These additional costs are typically estimated to be 4-20 times the wage amount. Using the conservative figure of 4%, these lost work days amount to more than \$225,200,000. Nonetheless, as can be seen in the table below, the savings due to the reduction in lost work days from 2003-2010 equates to more than \$7,400,000.

Year	# Lost Work Days	Salary Cost of Lost	Gain or Loss in Wages	
		Work Days§	Based on CY 2003	
2003	55,718	7,967,674		
2004	56,026	8,011,718	+44,044	
2005	52,934	7,569,562	-398,112	
2006	49,205	7,036,315	-931,359	
2007	39,971	5,715,853	-2,251,821	
2008	42,423	6,066,489	-1,901,185	
2009	45,036	6,440,148	-1,527,526	
2010	52,590	7,520,370	-447,304	
Total	393,903	56,328,129	-7,413,263	

This committee expanded its focus in FY 2010 to include the NYS Office of Mental Health (OMH) and the NYS Office for People with Developmental Disabilities (OPWDD) applying the

§ Based on \$143./day (NYS Veterans' Home at Batavia)

[‡] NYS Veterans' Home at Batavia

same approach used for Long Term Care. As with the long term care sector, the data provided on the SH900 and 900.1 has not been reliable therefore the committee initially focused on recordkeeping. Trends identified in these two additional sectors indicate that injuries in OPWDD are largely due to resident handling, slips, trips, falls or workplace violence. Injuries in OMH facilities are largely due to workplace violence. Because of the unique nature of these facilities, staff participated in a one day training session on workplace violence in OPWDD and OMH facilities presented by labor representatives. Programmed inspections in OPWDD residences where initiated in FFY2011. This will continue in FFY2012 and will include all three sectors covered by this group. The Lost Work Day Rate in both of these sectors has increased from State Fiscal Year 2007-2009.

Partnership Activity:

This strategic plan group continued to focus on building partnerships with nursing homes, acute care facilities and organizations affiliated with them. The partnership with Kaleida Health and NYS Veterans' Home at Batavia has continued as they have become model employers in reducing injuries due to resident handling and repositioning. The success of their SPH programs and the rate of return on their investments have provided much needed concrete evidence of the positive impact Safe Patient Handling Programs can have. A partnership with Upstate Medical University has also been developed. Upstate Medical University recently renovated several areas of the hospital and installed state of the art equipment for handling and lifting bariatric patients. Upstate Medical University was a co-sponsor of the Safe Patient Handling Conference held in October 2010. They provided a tour of their facility and several speakers for the conference. The partnership with Staten Island University Hospital (SIUH) is continuing. SIUH provided a speaker for the SPH conference. This employer is part of the North Shore Long Island Jewish Healthcare system and is one of the largest healthcare providers in the state. They are working toward implementing a Safe Patient Handling program throughout the system, SIUH being the pilot.

Members of this committee continue to work with WNYCOSH and NYCOSH through the NYS Zero Lift Task Force. Members of this committee worked with NYCOSH planning SPH conferences held in Brooklyn and Long Island during FFY2011. The NYS Zero Lift Taskforce and the NYSDOL held a SPH conference on October 17-19th, 2011 in Albany. CSEA and PEF are members of the Task Force and play an important role in planning the SPH conferences. The partnerships with CSEA and PEF have been extremely important at OMH and OPWDD facilities. This committee will continue to explore ways to help reduce the number and severity of injuries in all three sectors, in partnership with labor and management.

Injury Data Collection, Analysis:

This committee uses two sets of data, PESH required records including the SH900 and 900.1 for Long Term Care facilities and the Annual Report of NYS Government Employees' Workers' Compensation Claims for OPWDD and OMH.

Outreach:

This committee provided training and assistance on recordkeeping and injury data analysis to all three sectors. During the past year software was developed to help employers complete the required SH900 and 900.1. This program categorizes the injuries and provides a graphic representation of the injury trends. This was presented at the 2011 Safe Patient Handling conference. Development of this tool will continue in FFY2012. The Healthcare Resource CD has also been updated.

Consultations and Inspections:

Based on IMIS data there were 21 inspections and 2 consultations conducted in these 3 NAICS during FFY 2011. It was determined that the inspection staff is using several different NAICS for OPWDD and OMH facilities which resulted in them not being captured in the IMIS data. According to PESH data, there were 49 inspections and 4 consultations conducted in these sectors. These inspections included 4 NEP Recordkeeping inspections, two of which resulted in NOV's being issued and two did not.

Training:

A two-day Safe Patient Handling conference was held October 4-5, 2010. As in the past, the sessions include hands-on-demonstrations of state of the art equipment used to minimize or eliminate manual handling. As with other conferences provided by this committee, sessions were held on developing a SPH program, maintaining the program, ensuring its success, training and competency, labor/management successes and cost benefit discussions. Two hundred people including vendors and speakers were in attendance.

This committee was involved in two additional conferences sponsored by NYCOSH. One was held in Brooklyn and another on Long Island. PESH staff also received training by PEF, CSEA and NYSCOPBA regarding Workplace Violence in OPWDD and OMH facilities.

Future Activities Planned:

This committee plans to continue to be involved with the NYS Zero Lift Task Force and will be co-sponsoring Safe Patient Handling conferences. It plans to develop a Safe Patient Handling training video and will continue to improve the Healthcare CD and the recordkeeping software. Although there remains much work to be done with reducing worker injuries due to patient handling and repositioning in long term care, increased focus will be put on reducing the number of lost work days and the lost work day rate due to injuries related to workplace violence and slips, trips and falls.

This committee will continue to focus on recordkeeping issues in these facilities. An increase in an on-site presence in these facilities is a major goal of this committee.

Fire Service - NAICS 922160 Fiscal Year 2011

Performance Goal #1C: Improve accuracy of Injury and Illness recordkeeping with focus on NYC, Initiate 10 Records Only Inspections

Activity Measures:

- 7. **Partnerships** Continued building partnerships with FASNY, NYSAFC and county fire coordinators
- 8. **Recordkeeping** Conducted 9 Records-Only inspections.
- 9. **Outreach/Technical Assistance Visits** There were 15 Outreach/Intervention Visits and 52 Technical Assistance visits conducted in FY 2011.
- 10. **Consultations** There were 71 consultations conducted in FFY 2011.
- 11. **Inspections** There were 197 inspections conducted in FY 2011, 29 of which were planned programmed inspection.
- 12. **Training Seminars** There was 1 training session and 4 speeches conducted in FFY 2011.

Primary Outcome Measures:

The goal of this committee was to improve accuracy of Injury and Illness recordkeeping with focus on NYC and to initiate 10 Records Only Inspections.

Measure Description	1 st	2^{nd}	3 rd	4 th	Total
	Quarter	Quarter	Quarter	Quarter	
Records Only Visits *	0	5	0	4	9

^{*} IMIS report

Introduction:

In FFY 2011 this committee reconvened after not being part of the PESH Strategic Plan for a year. During FFY 2011 they performed inspections, consultations and outreach on strategic plan activities and continued to refine goals and objectives with emphasis on the proper recording of Injury and Illness rates with overall goal of Injury and Illness reduction. The group has been developing a training video on Code Rule 800.7, Emergency Escape and Self Rescue Ropes and System Components for Firefighters.

Staff responded to the recent Hurricane Irene and Tropical Storm by providing just-in-time training, assisting at the New York State Emergency Operations Center and at the FEMA JFO as Safety Officer. Outreach was also performed to first responders and other state, county and local agencies.

This committee continued to review and revise of Fire Service Resource CD which will be ready for distribution in early 2012.

Partnership Activity

This committee continues to work with FASNY, NYSAFC and County Fire Coordinators as it relates to PESH activities. Members attend County Level Emergency Management meetings.

Outreach and Interventions:

The committee continues to perform statewide outreach activities on all PESH related topics with emphasis on recordkeeping.

Consultations:

Through the partnership building of this committee, 71 consultations were conducted in FFY2011.

Inspections:

Staff performed a total of 197 enforcement inspections during FFY 2011, 9 of which were records only. There were no complaint inspections conducted in FFY 2011.

Training Seminars:

During this past year this committee began preliminary development of in-house training for Fire Brigade inspections to be provided for new staff. This training is being delivered in mid December.